

<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (P.L.R. 4818).</p>		<p>Complete if Known</p>	
<p>FEE TRANSMITTAL For FY 2009</p>		Application Number	10/582,728-Conf. #4669
		Filing Date	June 14, 2006
		First Named Inventor	Alberto Osio Sancho
		Examiner Name	Humera N. Sheikh
		Art Unit	1615
<p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		Attorney Docket No.	O0327.70000US00
<p>TOTAL AMOUNT OF PAYMENT (\$) 425.00</p>			

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☐ Deposit Account Deposit Account Number 29/2825 Deposit Account Name Wolf, Greenfield & Sacks, P.C.
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**
☒ Charge any additional fee(s) and underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEES

2. EXCESS CLAIM FEES		Small Entity
<u>Fee Description</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
_____	_____	_____	_____	_____
_____ or HP = _____	_____	_____	_____	_____
HP = highest number of total claims paid for, if greater than 20.				<u>Fee (\$)</u> <u>Fee Paid (\$)</u>
_____				_____
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	
_____	_____	_____	_____	
_____ or HP = _____	_____	_____	_____	
HP = highest number of independent claims paid for, if greater than 3.				

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification. \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):	2252 Extension for response within second month	245.00
	1806 Submission of an Information Disclosure Statement	180.00

SUBMITTED BY				
Signature	/C. Hunter Baker/	Registration No. (Attorney/Agent)	46,533	Telephone 617.646.8000
Name (Print/Type)	C. Hunter Baker, M.D., Ph.D.			Date November 24, 2010

Certificate of Electronic Filing under 37 CFR § 1.8

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: November 24, 2010

Signature: /Sara J. L. Douglas/ (Sara J. L. Douglas)